

CLAIMS ONLY							Application Number	Filing Date		
<i>10/10/07</i>							<i>10/780090</i>			
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			1							
2			1							
3			3							
4			3							
5										
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8			1							
9										
10			1							
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50										
Total Indep			1							
Total Depend			16							
Total Claims			17							